

## Wisconsin Business Contact Survey

The Small Business Clean Air Assistance Program (SBCAAP) helps small businesses to gain an understanding of the Clean Air Act requirements and other environmental regulations that may apply to their operations. When SBCAAP receives a completed survey, a review will be performed to determine if certain permits may be necessary under which DNR programs. Either SBCAAP staff will make an initial evaluation of permit needs or DNR staff will be brought in, without being given identifiable business information, to do the review when SBCAAP staff do not have sufficient experience.

There maybe some questions or terms in this survey that you find confusing. If so, please contact one of the SBCAAP Clean Air Specialists at (608) 264-6153 or (608) 267-9214 for assistance.

To ensure a quick review, please include the following as attachments to the form:

- ☐ Location Map (USGS topographic map, 1:24,000 scale OR plat map)
- ☐ Site map with a scale of 1"=10' to 1"=20'. Please do not submit documents larger than 24"x 36" sized.
- ☐ Copies of any applicable permits DNR has issued to your facility already.

Facility/Business Name \_\_\_\_\_

Contact Name/Title \_\_\_\_\_

Contact Phone Number (    ) \_\_\_\_\_ - \_\_\_\_\_ x \_\_\_\_\_ Fax Number (    ) \_\_\_\_\_ - \_\_\_\_\_

Address of Contact \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ - \_\_\_\_\_

\*\*\*\*\*

Business Site Address/Location if different than above

\_\_\_\_\_

City/Village/Town

\_\_\_\_\_

Legal Description \_\_\_\_\_ 1/4 , \_\_\_\_\_ 1/4, Sec. \_\_\_\_\_, T \_\_\_\_\_ N, R \_\_\_\_\_ (E/W)

County \_\_\_\_\_ What SIC code does your facility fall under? \_\_\_\_\_

When Business Started? \_\_\_\_\_ What is the size of your site (in acres)? \_\_\_\_\_.

What is the distance to the closest water body? \_\_\_\_\_ feet.

Check the appropriate type: Creek? \_\_\_\_\_ River? \_\_\_\_\_ Pond? \_\_\_\_\_ Lake? \_\_\_\_\_

Is it a navigable waterway? ☐ Yes ☐ No.

Are there any wetlands located on the property? ☐ Yes ☐ No.

*If yes, please identify their location on a site plan.*

What type of heating source(s) are used for your facility (i.e. boiler, space heater, electric furnace) and what do the units run on (i.e. natural gas, propane, fuel oil, wood, coal, electricity)?

\_\_\_\_\_

Are there back-up or alternative sources (i.e. generator, a second fuel)? ☐ Yes ☐ No.

If yes, what type and fuels? \_\_\_\_\_

Which local utilities do you use? Check all that apply:

Water \_\_\_\_\_ Sanitary Sewer \_\_\_\_\_ Storm Sewer \_\_\_\_\_ Natural Gas \_\_\_\_\_ Electricity \_\_\_\_\_

If no sanitary sewer is available, how will liquid wastes be handled?

\_\_\_\_\_

Does your facility have a private water well? ☐ Yes ☐ No.

If yes, is the maximum flow capacity 70 gallons/min or more (100,000 gallons/day)?

☐ Yes ☐ No. *Please include flow to sprinkler systems & fire safety devices.*

How many people enter your facility per day?

\_\_\_\_\_ No. of employees/shift? \_\_\_\_\_ Total no. of employees on site/day?

\_\_\_\_\_ No. of customers on site/day?

Is there any wastewater discharge from you facility? ☐ Yes ☐ No.

If yes, does it go to surface or groundwater? \_\_\_\_\_

How much is normally discharged? \_\_\_\_\_

Is it possible for you to discharge to a POTW (Publicly Owned Water Treatment Facility)?

☐ Yes ☐ No.

What are your primary raw materials? \_\_\_\_\_

Secondary raw materials? \_\_\_\_\_

Does your process involve the use of any hazardous materials? ☐ Yes ☐ No.

If yes, please explain:

\_\_\_\_\_

If you are unsure if any material is hazardous, please contact us and we will assist you with that determination.

Please attach any Material Safety Data Sheets (MSDS) for raw materials used in your process. If you use a wide range of similar products, sending one representative MSDS for the lot is acceptable. Please be sure to identify it as representative of X materials. ("This MSDS represents 50 similar paints.")

Completed? ☐

What type of waste does your facility generate (i.e., metal debris, sawdust, office paper, paint sludge, dirty clean-up solvents, dirty process water)?

\_\_\_\_\_

\_\_\_\_\_

Does your process emit pollutants into the air? (*In addition to chemical emissions, please consider particulate sources such as dust or smoke, but not clean steam.*)

☐ Yes ☐ No.

If yes, what type, and how many tons/year is anticipated (*please consider maximum production: 365 days/year, 24 hr/day*).

\_\_\_\_\_

\_\_\_\_\_

What is your maximum throughput of final product? (*i.e. in units of board-feet, gallons, pounds, square-foot, etc. of material used hourly, monthly AND annually – please consider maximum designed capacity.*)

Amount per:  
Units \_\_\_\_\_ Hour \_\_\_\_\_ Month \_\_\_\_\_ Annual \_\_\_\_\_

Do you have any treatment systems on any of your emissions points? (*Please include both air and water treatment/controls.*) ☐ Yes ☐ No.

If yes, what types?

---

---

Does your company have an interest in ISO 14000 or an Environmental Management System (EMS)? ☐ Yes ☐ No. ☐ We are not sure, but would like more information. ☐

Please give a brief explanation of your facility's production process.

---

---

---

---

---

---

---

---

---

---